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CONFIRMATION NO. 9326

<b>SERIAL NUMBER</b> 09/877,645	<b>FILING OR 371(c) DATE</b> 06/09/2001 <b>RULE</b>	<b>CLASS</b> 015	<b>GROUP ART UNIT</b> 1744	<b>ATTORNEY DOCKET NO.</b>
<b>APPLICANTS</b> Maria R. Cabedo-Deslierres, Fullerton, CA; John M. Deslierres, Fullerton, CA;				
<b>** CONTINUING DATA *****</b> This appln claims benefit of 60/210,238 06/08/2000 and claims benefit of 60/237,078 09/30/2000				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **</b> ** 08/22/2001				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature Initials		<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 3	<b>TOTAL CLAIMS</b> 16 <b>INDEPENDENT CLAIMS</b> 4
<b>ADDRESS</b> MARIA R. CABEDO-DESLIERRES 2337 E. Brookdale Place Fullerton ,CA 92831				
<b>TITLE</b> TRIPLE CLEAN TOOTHBRUSH				
<b>FILING FEE RECEIVED</b> 737	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	